



## DISTRICT-ISSUED EDUCATOR CERTIFICATION RENEWAL APPLICATION

The Human Resources Department accepts applications for renewals up to one (1) year prior to the certificate expiration date. Renewals must occur on or before April 1 of the expiration year to be eligible for reappointment.

**Step 1** Complete the District Renewal Application (PER0175)

**Step 2** Print a copy of your [Frontline](#) in-service transcript. Teachers should use the validity period listed on their certificate when running the transcript copy (ex: July 1, 2017 - June 30, 2022). Questions regarding Frontline should be directed to the Talent Development Department at 772/429-3940. An educator must earn the equivalent of 120 in-service points during the current validity period of the certificate.

Methods of Renewal:

- In-service points: 1 hour = 1 in-service point
- College Classes: 1 semester hour = 20 in-service points
- Subject Area Exam: 1 passing score = 60 in-service points
- Teach a College Class: 1 semester hour = 20 in-service points
- A valid certificate issued by the National Board for Professional Teaching Standards will renew the Florida certificate in the subject shown on the national certificate.

**Step 3** Submit \$75 renewal fee. Payments are accepted via credit card via the following website: <https://stlucie.revtrak.net/tek9.asp?pg=products&specific=jnkpqri8>.

**Step 4** Send the documentation to the attention of Jennifer DiDonato in Human Resources.

Questions should be directed to Jennifer DiDonato at [jennifer.didonato@stlucieschools.org](mailto:jennifer.didonato@stlucieschools.org) 772/429-7512.



DISTRICT APPLICATION FOR A FLORIDA EDUCATOR'S CERTIFICATE

[Empty box for district name]

Official Use Only	Date Stamp	
Payment Amount <input type="text"/>		
Payment Number <input type="text"/>		
Payment Method (CHECK ONE)		
<input type="radio"/> Check	<input type="radio"/> Money Order	<input type="radio"/> Voucher
<input type="radio"/> Cash	<input type="radio"/> Credit Card	<input type="radio"/> Other

PERSONAL INFORMATION Complete entire Application in UPPERCASE letters using only black or blue ink.

1. Social Security Number

2. Birth Date ( MM / DD / YYYY )

3. Are you a US Citizen?  Yes  No

4. First Name

5. Middle Name

6. Last Name

7. Mailing Address

8. City

9. State  10. Zip Code  11. Phone

12. Country

13. E-mail Address:  @

14. What is your gender? (Optional)  
 M  F

15. Are you Hispanic or Latino? (Optional, choose only one)  
 No, not Hispanic or Latino  
 Yes, Hispanic or Latino

16. What is your race? (Optional, mark all that apply)  
 American Indian or Alaska Native  
 Asian  
 Black or African American  
 Native Hawaiian or Other Pacific Islander  
 White

CURRENT VALID FLORIDA EDUCATOR'S CERTIFICATE INFORMATION

Please select your currently valid Florida Certificate Type.  Professional  Non-Renewable Temporary

Please indicate the validity period of your Florida Certificate.  
 July 1,  to June 30,

CERTIFICATE OR SERVICE REQUESTED

19. Please select the Certificate Service Requested. (Please select only one service per application)

- Add a subject or endorsement to my valid Florida Certificate.\* (go to question 20)
- Reprint a duplicate of my valid Florida Certificate. (skip to page 2)
- Reprint my valid Florida Certificate due to a legal name change. (skip to page 2)

20. Please indicate the subject code for the subject coverage or endorsement to be added to your Florida Certificate.

Please refer to the District Additions Subject Area/Grade Level Chart for the appropriate code numbers

\* Please note: Districts may add a subject coverage or endorsement to a valid Florida certificate **ONLY** on the basis of the completion of the appropriate subject area testing requirements of s.1012.56(4)(a), FS, or the completion of the requirements of an approved school district program or the inservice components for an endorsement.

**Academic Coverages, Specialty Coverages, and Degreed Vocational Coverages** may be added **ONLY** to a valid Florida **Professional** Certificate through use of this application to your employing school district.



DISTRICT APPLICATION FOR A FLORIDA EDUCATOR'S CERTIFICATE

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PERSONAL INFORMATION

Complete in UPPERCASE letters using only black or blue ink.

Social Security Number

[Social Security Number input boxes]

First Name

[First Name input boxes]

Last Name

[Last Name input boxes]

LEGAL DISCLOSURE (Florida Law requires you to provide a YES or NO response)

After answering each of the following questions, you must sign the Affidavit to complete this section of your application. Please refer to the instructions in the Legal Disclosure Supplement on the reverse side of this page for additional information regarding this section of the application form.

SEALED OR EXPUNGED RECORDS (Report ONLY sealed or expunged records in this section)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever had any record sealed or expunged in which you were convicted of a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you were found guilty of a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you had adjudication withheld on a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you pled nolo contendere to a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you pled guilty to a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you entered into a pretrial diversion program or deferred prosecution program related to a criminal offense?
YES NO Do you have a petition pending to seal or expunge any criminal offense record?

SEALED or EXPUNGED records MUST BE REPORTED pursuant to ss. 943.0585 and 943.059, Florida Statutes. However, existence of such records WILL NOT BE DISCLOSED nor made part of your certification file which is public record.

CRIMINAL OFFENSE RECORD(S) (Report any record other than sealed or expunged in this section.)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever been convicted of a criminal offense?
YES NO Have you ever been found guilty of a criminal offense?
YES NO Have you ever had adjudication withheld on a criminal offense?
YES NO Have you ever pled nolo contendere to a criminal offense?
YES NO Have you ever pled guilty to a criminal offense?
YES NO Have you ever entered into a pretrial diversion program or deferred prosecution program related to a criminal offense?
YES NO Are there currently charges pending against you for any criminal offense?

PROFESSIONAL LICENSE OR CERTIFICATE SANCTION(S)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever had a professional license or certificate sanctioned or disciplined in this state or any other state?
YES NO Have you ever been DENIED a professional license or certificate in this state or any other state even if the certificate or license was later issued with conditions or limitations?
YES NO Have you ever had a professional license or certificate suspended or revoked in this state or any other state?
YES NO Have you ever surrendered, resigned, or relinquished a professional license or certificate in this state or any other state during or following an investigation into allegations of misconduct?
YES NO Have you ever had a professional license or professional certificate disciplined in this state or any other state by receiving a letter of reprimand, fine, probation or any other restriction or special conditions?
YES NO Do you have any current investigative action pending in this state or any other state against a professional license or certificate or against an application for a professional license or certificate?
YES NO Do you have any current disciplinary action pending in this state or any other state against a professional license or certificate or against an application for a professional license or certificate?

If you answered YES to any of the preceding questions, you must provide detailed complete information for each affirmative response in the Legal Disclosure Supplement on the reverse side of this page and submit it along with your application form.

## LEGAL DISCLOSURE SUPPLEMENT

Florida Law requires you to provide a YES or NO answer to the questions within the Legal Disclosure section of your application, even if previously submitted. If you answered YES to any question in the Legal Disclosure section on the application form, you must provide detailed complete information for each affirmative response within the corresponding section in this Legal Disclosure Supplement.

You are not required to acknowledge minor traffic violations. The criminal offense of Driving Under the Influence (DUI) or Driving While Intoxicated (DWI) is **not** a minor traffic violation and should be disclosed on this form.

Having a criminal history or administrative sanction against a professional license does not automatically disqualify a person from receiving a Florida Educator's Certificate, but such incidents will prompt a review by the Office of Professional Practices Services.

A person is **ineligible for educator certification** if the person has been **convicted of a disqualifying offense** as listed in Section 1012.315 Florida Statutes. Please refer to [www.myfloridateacher.com](http://www.myfloridateacher.com) for more information.

First Name	Middle Name	Last Name	Former Name	Any Other Last Names / Aliases

## SEALED OR EXPUNGED RECORD(S)

City Where Arrested	State	Date of Arrest	Charge	Plea	Disposition (outcome)

## CRIMINAL OFFENSE RECORD(S)

City Where Arrested	State	Date of Arrest	Charge	Plea	Disposition (outcome)

## PROFESSIONAL LICENSE OR CERTIFICATE SANCTION(S)

State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	
State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	
State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	

## AFFIDAVIT

I do hereby affirm by my signature that all information provided in this application and supplement is true, accurate, and complete.

**WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN OR RENEW A FLORIDA EDUCATOR'S CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO CRIMINAL PROSECUTION, AS WELL AS DISCIPLINARY ACTION BY THE EDUCATION PRACTICES COMMISSION.**

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE